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## **INSURANCE REQUIREMENTS**

**To:** All Subcontractors  
**From:** Robin Kelley, Head of Client & Subcontractor Relations  
**Re:** Certificates of Insurance

**We are looking forward to working with you. However, prior to commencing any construction or moving-on of material, equipment or manpower we must have an insurance certificate as outlined below:**

### **Commercial General Liability:** Occurrence Form Only

- ❖ General Liability with limits of no less than \$1 million and must include Primary Wording and Waiver of Subrogation. SIMAC Construction, Inc. must be listed as certificate holder as well as additional insured,
- ❖ The certificate must include a separate endorsement naming SIMAC as additional insured and must not exclude completed operations. We prefer a CG 2010 1185. Some examples of unacceptable endorsements include the CG 2010 1093 & CG 2010 0397. Please note an unacceptable endorsement will only cover on-going operations. SIMAC may, at its discretion, accept an endorsement that does not cover completed operations.
- ❖ If SIMAC's contract with the Owner has additional requirements, subcontractor must also comply with those requirements.

### **Automobile Liability:**

- ❖ Bodily Injury Liability and Property Damage Liability in an amount not less than \$1,000,000, Combined Single Limit.
- ❖ The insurance required must include Owner (Long Term Leased), Employer's Non Owned and Hired Automobile Coverage.

### **Worker's Compensation Insurance:**

- ❖ Limits no less than \$1,000,000 (or statutory limits)
- ❖ Certificate must include a Waiver of Subrogation.

Contractor shall, by separate endorsement to its policies of insurance, (except for Worker's Compensation Insurance) add the following as additional insured:

"SIMAC Construction, Inc. and all of their subsidiaries, agents  
and employees, are Additional Insureds jointly and /or severally"

Certificate may reference a specific project or cover all operations. Please forward a copy via facsimile to (858) 587-1903 as soon as possible with the original to follow by mail.

\*\* If you currently have no employees, please forward a copy of your 'Exemption from Worker's Compensation filed with the Contractor's State License Board [Form #13L-50 (6/04)].

We suggest you forward these requirements to your insurance agent. If you or your agent has any questions regarding these requirements, please call Robin Kelley (760) 737-2100.